STATE OF INDIANA)) SS:	BEFORE THE INDIANA
COUNTY OF MARION)	COMMISSIONER OF INSURANCE
	CAUSE NUMBER: 9948-AG11-0104-002
Scott D. Goffinet, Agent / Respondent	FILED
20018 Huber Road	FEB 07 2011
Border, Indiana 47106	,
Type of Agency Action: Enforcement	STATE OF INDIANA DEPT. OF INSURANCE
Indiana Insurance License No.: 622985	

FINAL ORDER AND APPROVAL

The Indiana Department of Insurance ("Department") and Scott D. Goffinet, ("Respondent"), signed an Agreed Entry which purports to resolve all issues involved in the action by the Department regarding Respondent's license, and which has been submitted to the Commissioner of Insurance for approval.

The Commissioner, after reviewing the Agreed Entry, finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Commissioner hereby incorporates the Agreed Entry as if fully set forth herein, and approves and adopts in full the Agreed Entry as a resolution of this matter.

IT IS THEREFORE ORDERED by the Commissioner of Insurance:

- 1. Respondent intentionally misrepresented the terms of an actual or proposed insurance contract or application for insurance.
- 2. Respondent used fraudulent and dishonest practices, demonstrating untrustworthiness in the conduct of business in Indiana.
- 3. Respondent forged another's name to an application for insurance.
- 4. Respondent failed to pay state income tax.
- 5. Respondent failed to timely inform the Commissioner of a change in address.
- 6. Respondent's Indiana resident producer's license, number 622985, is Permanently Revoked.

ALL OF WHICH IS ORDERED this _____day of ____

Commissioner

Indiana Department of Insurance

Distribution:

Nikolas P. Mann INDIANA DEPARTMENT OF INSURANCE 311 West Washington Street, Suite 300 Indianapolis, Indiana 46204-2787

Scott D. Goffinet 20018 Huber Road Border, Indiana 47106

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AGREED ENTRY

This Agreed Entry is entered into by Nikolas P. Mann, attorney for and on behalf of the State of Indiana, Department of Insurance ("Department"), and Scott D. Goffinet ("Respondent"), who was a licensed Indiana resident insurance producer holding license number 622985, to resolve all matters under Cause Number 9948-AG11-0104-002. This Agreed Entry is subject to the review and approval of Stephen W. Robertson, Commissioner, Indiana Department of Insurance.

WHEREAS, Respondent was a licensed resident insurance producer in the State of Indiana, until Respondent's license was terminated for failure renew, effective October 31, 2010; and

WHEREAS, on November 16, 2010, the Department received a letter from Justin Guidi, a Regional Sales Coordinator with AFLAC Insurance Company, stating that Respondent was terminated for cause due to fraud. Two (2) days later the Department received an e-mail message from Justin Guidi stating that Scott D. Goffinet filled out and submitted policy applications on people that do not exist, signed people up for policies

that they did not want, lied to companies about his conduct, and forged signatures on insurance documents; and

WHEREAS, on January 5, 2011, Department investigator Mike Herndon was notified by Tesesa Noonan, a Tax Examiner with the Indiana Department of Revenue, that Respondent has outstanding tax warrants and owes the State of Indiana a total of one thousand two hundred sixty-eight dollars and eleven cents (\$1,268.11); and

WHEREAS, on December 30, 2010 Department investigator Mike Herndon contacted Respondent by telephone. In the conversation, Respondent stated that he has resided at 20018 Huber Road, Borden, Indiana 47106 for approximately two (2) years. A review of Respondent's Indiana Producer License documented Respondent's business and residential address as 1023 Seelye Road, Borden, Indiana 47106. There is no record in the Department's license database that indicates Respondent timely notified the Department of the change of address; and

WHEREAS, the Department and Respondent desire to resolve their differences and settle the issues without a hearing;

IT IS, THEREFORE, NOW AGREED by and between the parties as follows:

- 1. The Commissioner has jurisdiction over the subject matter and Respondent in this administrative action.
- 2. This Agreed Entry is executed voluntarily by the parties.
- 3. Respondent voluntarily and freely waives his right to a public hearing on the issues in this action.
- 4. Respondent committed fraud in the business of insurance by intentionally misrepresenting the terms of proposed applications for insurance.

- 5. Respondent used fraudulent and dishonest practices, demonstrating untrustworthiness in the conduct of business in Indiana.
- 6. Respondent forged applicants' signatures on applications for insurance.
- 7. Respondent failed to pay state income tax.
- Respondent failed to timely inform the Commissioner of a change in 8. address.
- Respondent agrees to the permanent revocation of his Indiana resident 9. insurance producer license number 622985.
- 10. The Department agrees to accept Respondent's compliance with the terms of this Agreed Entry as full resolution of this matter.
- 11. Should this Agreed Entry not be accepted by the Commissioner, it is agreed that presentation to and consideration of this Agreed Entry by the Commissioner shall unfairly illegally prejudice the not or Commissioner from further participation in or resolution of these proceedings.
- 12. Respondent has carefully read this agreement and fully understands and accepts its terms.

Nikolas P. Mann, Attorney

Indiana Department of Insurance

Scott D. Goffinet, Respondent

	STATE OF INDIANA) Amber Vogt Notary Public Indiana Seal Floyd County Commission Number #614878 Expiration Date 1-13-2018
	Before me a Notary Public for Floyd County, State of Indiana
	personally appeared Scott D. Goffinet and being first duly sworn by me upon his oath
	states that the facts alleged in the foregoing instrument are true. Signed and sealed this
	alo day of January 2010.
	Notary Signature
	Amber Vogt Notary Name Printed
,	My Commission expires: \(\frac{13\2018}{}\)
	County of Residence: Floyd
	INDIANA DEPARTMENT OF INSURANCE Enforcement Division Suite 300 311 West Washington Street Indianapolis, IN 46204-2787 317/234-5888 - telephone 317/234-2103 - facsimile